

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 716504

1. Entity Name

MARTINIQUE CLUB OF NAPLES, INC.

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90153 041 ****61.25

Principal Place of Business

Mailing Address

3003 GULF SHORE BLVD N.
NAPLES FL 34103
US

C/O MELDON CONSULTANTS
800 HARBOUR DR
NAPLES FL 34103-4451
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1374818

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MELDON, THOMAS E
C/O MELDON CONSULTANTS
800 HARBOUR DR
NAPLES FL 34103

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Thomas E. Meldon

THOMAS E. MELDON

4/5/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME D
STREET ADDRESS JORDAN, RICHARD J
CITY-ST-ZIP 11828 SUNSET GROVE COURT
ST LOUIS MO 63127

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME DVPT
STREET ADDRESS KNORR, EDWARD
CITY-ST-ZIP 3003 GULF SHORE BLVD. N.
NAPLES FL

TITLE ☐ Change ☒ Addition
NAME DS
STREET ADDRESS JONES, SHIRLEY
CITY-ST-ZIP 1400 INWOODS CIRCLE
BLOOMFIELD HILLS, MI 43551

TITLE ☒ Delete
NAME DP
STREET ADDRESS KIZER, PETER
CITY-ST-ZIP 33000 COVINGTON CLUB DR. A-77
FARMINGTON HILLS MI 48334

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS ZIEMS, THOMAS
CITY-ST-ZIP 10581 SPRING MILL LANE
PERRYSBURG, OH 43551

TITLE ☐ Delete
NAME D
STREET ADDRESS TYRELL, GERALD J
CITY-ST-ZIP 24 STEEP HILL RD
WESTON CT 06883

TITLE ☒ Change ☐ Addition
NAME DP
STREET ADDRESS TYRRELL, GERALD J.

TITLE ☐ Delete
NAME DS
STREET ADDRESS CRAWFORD, SHELIA
CITY-ST-ZIP 3029 WYNFIELD MEWS LANE
LOUISVILLE KY 40206

TITLE ☒ Change ☐ Addition
NAME DVP
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME T
STREET ADDRESS ROUBINEK, GARY
CITY-ST-ZIP 3 QUEENS PEAK
CANTON, CT 06019

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other line empowered.

SIGNATURE:

Gerald J. Tyrrell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/00

Date Daytime Phone #

CR2E037 (9/99)